PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10 674 615

		CL AIMS A	SELED	DADTI					<u></u>	1 01	
CLAIMS AS FILED - PART I								ENTITY			R THAN
T	OTAL CLAIMS	9	(Column	<u>a 1)</u>	(Coil	umn 2)	TYPE		OR		ENTITY
-			45-				RATE	FEE		RATE	FEE
_	OR		NUMBER	FILED	NUME	BER EXTRA	BASIC FE	EE 375.00	OR	BASIC FEE	
		EABLE CLAIMS	28 mir	inus 20= *	* 8	2	X\$ 9=	:	OR	X\$18=	144
-	DEPENDENT C		1	ninus 3 = *	<u>*</u>	,	X42=		OR	V04	
IVIC		ENDENT CLAIM PI	RESENT	RESENT				1	7		
* If	the difference	e in column 1 is	less than ze	.ero, enter '	"0" in (column 2	+140= TOTAL		OR	L	Buch
	(CLAIMS AS A	AMENDE	o - Part	۲ II		1017.00		OR		894 THAN
_		(Column 1)		(Column	nn 2)	(Column 3)	SMALI	L ENTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	BER USLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDI	Total	*	Minus	**		=	X\$ 9=	 	OR	X\$18=	<u> </u>
AM	Independent	* ENTATION OF MI	Minus	***		=	X42=	-	OR	X84=	
-	FINOI FILLO	ENTATION OF MU	JLTIPLE DEF	PENDENIC	CLAIM			+	1 1		
							+140= TOTAL		OR	+280= TOTAL	-
		(O=1: 1)		1-	6.		ADDIT. FEE		OR A	TOTAL ADDIT. FEE	<u> </u>
		(Column 1) CLAIMS		(Column		(Column 3)					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	ER USLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N.	Total		Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MIL	Minus	***		=	X42=	+	1 1	X84=	i
	FIMOI PRESE	ENTATION OF MU	ILTIPLE DEP	'ENDENT C	LAIM			 	OR		1
							+140=	+	OR	+280=	
							TOTAL ADDIT, FEE		OR A	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS		(Column		(Column 3)					
ENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FO	ER JSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
PMON	Total		Minus	**		=	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	FEE	1		FEE
5 -	Independent		Minus	***		=	X\$ 9=	 	OR	X\$18=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						X42=	<u> </u>	OR	X84=	
* If	the entry in colum	+140=		OR	+280=						
*** f	f the "Highest Nur	Imber Previously Paid Imber Previously Paid	ud For" IN THIS	S SPACE is les	ess than	1 20, enter "20."	TOTAL ADDIT. FEE		OR AE	TOTAL DDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ADDIT. FEEOR											